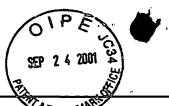


ိုင္ပ	Please type a plus sign (+) inside this box +			A	PTO/SB/01 (10-00)		
יַ מונ יַ	Under the Panerwo	ork Reduction Act of 1995, no pers	ons are required t		atent and Trademark O	or use through 10/31/2002. OMB 0651-003; ffice; U.S. DEPARTMENT OF COMMERCI less it contains a valid OMB control number		
IST COM	DEC	LARATION AND	ions are required t		cket Number	ORT-1453		
	POWER		First Named		Carlos Plata-Salaman			
	FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)			COMPLETE IF KNOWN				
	(σ.	······································		Application	Number	09/900,567		
	Declaration Submitted wit Initial Filing	h 🛛 Declaration Sub OR Initial Filing (So (37 CFR 1.16(e)	urcharge	Filing Date		July 6, 2001		
		(37 OF 1.10(6)	n required)	Group Art U	nit			
			_	Examiner N	ame			
As a	below named invento	r, I hereby declare tha	t:					
My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
ANTICONVULSANT DERIVATIVES USEFUL FOR PREVENTING THE DEVELOPMENT OF TYPE II DIABETES MELLITUS AND SYNDROME X (Title of the Invention)								
the s	specification of which							
is attached hereto								
OR								
		YYY) 07/06/2001 as Unnd was amended on (M			ımber or PCT In	ternational Application		
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.								
conti	nuation-in-part applicati		n which beca	ame available	between the filir	7 CFR 1.56, including for ng date of the prior application		
inver Unite or inv	ntor's certificate, or 365(ed States of America, lis ventor's certificate, or ar ity is claimed.	ted below and have also	onal application identified be believed by the believed application by the believed ap	on which designed and the contract of the cont	gnated at least of the street of the box, and the before that of the street of the str	ication(s) for patent or one country other than the y foreign application for patent the application on which		
	Prior Foreign Application Number(s)	Country		Filing Date D/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO		

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:



Country



DECLARATION - Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below. Filing Date (MM/DD/YYYY) Application Number(s) Additional provisional application 60/217,141 07/07/2000 numbers are listed on a supplemental priority data sheet 60/270,022 02/20/2001 PTO/SB/02B attached hereto. I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: Application Serial No. Filing Date Status **Patented Patented** Patented I hereby appoint: Place Customer Practitioners at Customer Number 000027777 Number Bar Code Label Here AND Practitioner(s) named below: <u>Name</u> **Registration Number** as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. Address all telephone calls to Ralph R. Palo at telephone number (732) 524-2818. Customer Number Direct all correspondence to: or Bar Code Label 000027777 OR Correspondence address below Name: Address: Address: City: State: ZIP

Telephone:

Fax:





I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

issued thereon.				<u> </u>					
NAME OF SOLE OR FIRST INVENTOR:	□Аре	etition has been fil	ed for this unsign	ed inventor					
Given Name (first and middle [if any]) Carlos	— Plata	Family Name or Surname	Plata-Salaman						
Inventor's Signature Carlos R. PLaTa-Salarian Date 15 August 2001									
Residence: City Ambler	State PA	Count	ry USA	Citizenship USA					
Mailing Address 1313 Squire Drive									
City Ambler	State PA			Country USA					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any]) Jeffrey Family Name or Surname Crooke									
Inventor's Signature Office Date 8/15/0(
Residence: City Dolyestown	State PA	Count	ry USA	CitizenshipUSA					
Mailing Address 5642 Old Easton Road									
City Doylestown	State PA	ZIP 1	8901	Country USA					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
NAME OF THIRD INVENTOR: A petition has been filed for this unsigned inventor									
Given Name (first and middle [if any])		Family Name or Surname							
Inventor's Signature	····		Date						
Residence: City	State	Count	ry	Citizenship					
Mailing Address									
City	State	ZIP		Country					